

Application Data Sheet**Application Information**

Application number::

Filing Date:: 02/20/2002

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: IMMUNE MEDIATORS AND RELATED
METHODS

Attorney Docket Number:: 014058-005631US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 0

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Wayne
Middle Name::
Family Name:: Kindsvogel
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 6014 -24th Avenue, N.E.
City of Mailing Address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98115

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Eva
Middle Name:: Pia
Family Name:: Reich
Name Suffix::
City of Residence:: Palo Alto
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2889 Greer Road
City of Mailing Address:: Palo Alto
State or Province of mailing address:: CA

Country of mailing address:: US
Postal or Zip Code of mailing address:: 94303

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jane
Middle Name::
Family Name:: Gross
Name Suffix::
City of Residence:: Seattle
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 4224 N.E. -110th Street
City of Mailing Address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98125

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Shrikant
Middle Name::
Family Name:: Deshpande
Name Suffix::
City of Residence:: Fremont
State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 34619 Lang Avenue
City of Mailing Address:: Fremont
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94555

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Paul
Middle Name:: O.
Family Name:: Sheppard
Name Suffix::
City of Residence:: Redmond
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 20717 N.E. 2nd Street
City of Mailing Address:: Redmond
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98053

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation:: Primary	Representative Number:: 42,058	Representative Name:: Annette S. Parent
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is a which is a	Continuation of Continuation of	09/261,811 08/657,581	03/03/99 06/07/96

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name::	Corixa Corp.
Street of mailing address::	1124 Columbia Street, Suite 200
City of mailing address::	Seattle
State or Province of mailing address::	Washington
Country of mailing address::	US
Postal or Zip Code of mailing address::	98104